| B1 (Official Form 1)(04/13) | | | | | | | | |
|---|--|---|--|--|--|---|--|----------------------------------|
| United States Bankruptcy Court District of Arizona | | | | | Vo | luntary | Petition | |
| Name of Debtor (if individual, enter Last, First, Redding, Jerie Lynn | Middle): | | Name | of Joint De | ebtor (Spouse) |) (Last, First, Middle): | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | oint Debtor in the last trade names): | 8 years | |
| Last four digits of Soc. Sec. or Individual-Taxpa | ayer I.D. (ITIN)/Com | plete EIN | Last fo | our digits of | f Soc. Sec. or | Individual-Taxpayer | I.D. (ITIN) No | o./Complete EIN |
| xxx-xx-6304 Street Address of Debtor (No. and Street, City, a 7910 E. Beverly St. | and State): | | Street | Address of | Joint Debtor | (No. and Street, City, | and State): | |
| Tucson, AZ | | ZIP Code 85710 | | | | | | ZIP Code |
| County of Residence or of the Principal Place o Pima | f Business: | | Count | y of Reside | ence or of the | Principal Place of Bus | siness: | |
| Mailing Address of Debtor (if different from str | eet address): | | Mailin | g Address | of Joint Debto | or (if different from str | reet address): | |
| | Γ | ZIP Code | | | | | | ZIP Code |
| Location of Principal Assets of Business Debtor (if different from street address above): | • | | | | | | | |
| Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Filing Fee (Check one box | (Check ☐ Health Care Bu ☐ Single Asset Re in 11 U.S.C. § ☐ Railroad ☐ Stockbroker ☐ Commodity Br ☐ Clearing Bank ☐ Other Tax-Exe (Check box ☐ Debtor is a tax-ex under Title 26 of Code (the Interna | eal Estate as d 101 (51B) oker mpt Entity c, if applicable) kempt organizat the United Stat dl Revenue Code | ion es e). | defined "incurr | the P er 7 er 9 er 11 er 12 er 13 are primarily co 1 in 11 U.S.C. § ed by an indivioual, family, or l | Chapter 15 of a Foreign Nature of Debts (Check one box) | k one box) Petition for Real Main Proceet Petition for Real Nonmain Proceet Debts | ecognition ding ecognition |
| Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's considerat debtor is unable to pay fee except in installments. Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerate. | individuals only). Mustion certifying that the Rule 1006(b). See Offic 7 individuals only). Mu | t De Check if: De are Check all BB. A I | btor is a sn btor is not btor's aggr less than S applicable plan is beir ceptances | egate nonco 62,490,925 (as boxes: ag filed with of the plan w | debtor as defin ness debtor as d ntingent liquida amount subject this petition. | ated in 11 U.S.C. § 101(51) lefined in 11 U.S.C. § 10 atted debts (excluding debto adjustment on 4/01/16) epetition from one or mo | 1(51D). ts owed to insid | e years thereafter). |
| Statistical/Administrative Information Debtor estimates that funds will be available Debtor estimates that, after any exempt properthere will be no funds available for distribution. | erty is excluded and | nsecured cred | itors. | | | THIS SPACE IS | FOR COURT | USE ONLY |
| 1- 49 99 199 999 | 1,000- 5,001- 5,000 10,000 | 10,001- 2 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million | \$1,000,001 \$10,000,001 to \$10 to \$50 million | \$50,000,001 \$ to \$100 to | 3100,000,001 o \$500 nillion | \$500,000,001 to \$1 billion | More than \$1 billion | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 | \$1,000,001 \$10,000,001 to \$10 to \$50 | \$50,000,001 \$ to \$100 to | 3100,000,001 o \$500 | \$500,000,001 to \$1 billion | More than \$1 billion | 10100110 17 1 | 0.40 | |

B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Redding, Jerie Lynn (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: Arizona-Chapter 13 Dismissed 4:11-bk-02407-JMM 1/28/11 Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Judge: Relationship: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Matthew Foley **December 2, 2013** Signature of Attorney for Debtor(s) (Date) Matthew Foley 023212 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. served the Landlord with this certification. (11 U.S.C.

B1 (Official Form 1)(04/13) Page 3 Name of Debtor(s):

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Jerie Lynn Redding

Signature of Debtor Jerie Lynn Redding

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

December 2, 2013

Date

Signature of Attorney*

X /s/ Matthew Foley

Signature of Attorney for Debtor(s)

Matthew Foley 023212

Printed Name of Attorney for Debtor(s)

Law Offices of Matthew Foley, PLC

Firm Name

4400 E. Broadway, Suite 811 **Tucson, AZ 85711**

Address

Email: matt@foleyplc.com

(520) 404-0529 Fax: (888) 329-4606

Telephone Number

December 2, 2013

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Entered 12/03/13 17:18:19 Case 4:13-hk-20788-BMW

Signatures

Redding, Jerie Lynn

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | | Case No. | |
|-------|--------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| | 4. I am not | required to re | eceive a cro | edit counse | eling br | iefing be | ecause o | f: [Check | the app | licable |
|------------|-------------|----------------|--------------|-------------|----------|-----------|-----------|-----------|---------|---------|
| statement. |] [Must be | accompanie | d by a moti | on for dete | erminat | ion by th | he court. | .] | | |

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Best Case Bankruptcy

| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness of |
|--|
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |
| financial responsibilities.); |

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Jerie Lynn Redding

Jerie Lynn Redding

Date: December 2, 2013

Certificate Number: 14439-AZ-CC-022282813



CERTIFICATE OF COUNSELING

I CERTIFY that on November 19, 2013, at 9:13 o'clock AM EST, Jerie L Redding received from National Financial Literacy Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Arizona, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: November 19, 2013

By: /s/Sam Bringhurst

Name: Sam Bringhurst

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | | Case No. | | |
|-------|--------------------|--------|----------|---|--|
| | <u> </u> | Debtor | | | |
| | | | Chapter | 7 | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 4 | 96,956.28 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 0.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 11 | | 53,590.78 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 2,394.89 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 2,408.00 |
| Total Number of Sheets of ALL Schedu | ıles | 25 | | | |
| | To | otal Assets | 96,956.28 | | |
| | | | Total Liabilities | 53,590.78 | |

Best Case Bankruptcy

United States Bankruptcy Court District of Arizona

| | | District of Arizona | | |
|-------|---|--------------------------------------|-------------------------------|------------|
| In re | Jerie Lynn Redding | | Case No. | |
| | | Debtor | , | |
| | | | Chapter | 7 |
| I | STATISTICAL SUMMARY OF (If you are an individual debtor whose debts are pri- a case under chapter 7, 11 or 13, you must report a | marily consumer debts, as defined in | | , |
| · | ☐ Check this box if you are an individual debt report any information here. | • | onsumer debts. You are not re | equired to |

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|-----------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 17,323.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 17,323.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 2,394.89 |
|--|----------|
| Average Expenses (from Schedule J, Line 18) | 2,408.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 3,113.57 |

State the following:

| bute the following. | | |
|--|------|-----------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 0.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 53,590.78 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 53,590.78 |

| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|-------------|--|
| - | | | |
| | | Debtor | |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

0 continuation sheets attached to the Schedule of Real Property

Case 4:13-bk-20788-BMW Doc 1 Filed 12/03/13

(Report also on Summary of Schedules) Entered 12/03/13 17:18:19 Desc

| In re | Jerie | Lynn | Redding |
|--------|--------|------|---------|
| 111 10 | OCI IC | _y | reading |

| Case No. | | |
|----------|--|--|
| | | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|----|--|---|---|--|
| 1. | Cash on hand | X | | |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit | US Bank P.O. Box 1800 Saint Paul, Minnesota 55101 Checking Account #4662 | - | 40.56 |
| | unions, brokerage houses, or cooperatives. | US Bank P.O. Box 1800 Saint Paul, Minnesota 55101 Savings Account #7808 | - | 5.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Security Deposit with Landlord | - | 99.00 |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Household Goods and Furnishings: dining room table with chairs, loveseat, coffee table, lamps, bed nightstand, dresser, television, clock, microwave, washing machine, vacuum cleaner, pots & pans, dishware, utensils, decor, bedding Location: 7910 E. Beverly St., Tucson AZ 85710 | - I, | 305.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | x | | |
| 6. | Wearing apparel. | Womens Clothing Location: 7910 E. Beverly St., Tucson AZ 85710 | - | 100.00 |
| 7. | Furs and jewelry. | Diamond Necklace Location: 7910 E. Beverly St., Tucson AZ 85710 | - | 90.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | x | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Term Life Insurance Policy through employer | - | 0.00 |
| | | (Tota | Sub-Tot l of this page) | al > 639.56 |

3 continuation sheets attached to the Schedule of Personal Property

| In re | Jerie | Lvnn | Redding | |
|-------|-------|------|---------|--|
| | | | | |

| Case No. |
|----------|
| |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 10. | Annuities. Itemize and name each issuer. | Х | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | ituit Inc. 401K Plan idelity | - | 7,865.72 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | В | ack Child Support owed to Debtor | - | 87,000.00 |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| | | | | | |
| | | | ,rr | Sub-Total | al > 94,865.72 |

(Total of this page)

Desc

Sheet <u>1</u> of <u>3</u> continuation sheets attached

| In re | Jerie | Lvnn | Redding | |
|-------|-------|------|---------|--|
| | | | | |

| Case No. |
|----------|
| |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any |
|-----|---|-------------------------|---|---|---|
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | Community | Secured Claim or Exemption |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | x | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | x | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | 218,0 Vin # Purcl | Pontiac Grand Am 4DSD 00 Miles 1G2NE52M1VC805522 hased: 2006 tion: 7910 E. Beverly St., Tucson AZ 85710 | - | 1,401.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | 2 Cat Loca | s tion: 7910 E. Beverly St., Tucson AZ 85710 | - | 50.00 |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| | | | | Sub-Tota | al > 1,451.00 |

Sub-Total > (Total of this page)

Sheet **2** of **3** continuation sheets attached

| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|-------------|--|
| _ | | , Debtor | |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|---|
| 34. Farm supplies, chemicals, and feed. | Х | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > 0.00 (Total of this page) Total > 96,956.28

Sheet <u>3</u> of <u>3</u> continuation sheets attached

to the Schedule of Personal Property

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Report also on Summary of Schedules)

Best Case Bankruptcy

| • | |
|----|----|
| In | re |

Purchased: 2006

Animals 2 Cats

Location: 7910 E. Beverly St., Tucson AZ 85710

Location: 7910 E. Beverly St., Tucson AZ 85710

Jerie Lynn Redding

Debtor claims the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) | \$155,675. (Amount subject to adjustment on 4/1/16, and every three years with respect to cases commenced on or after the date of adjust | | | | | | | |
|--|--|----------------------------------|---|--|--|--|--|--|
| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption | | | | | |
| Checking, Savings, or Other Financial Accounts, C US Bank P.O. Box 1800 Saint Paul, Minnesota 55101 Checking Account #4662 | ertificates of Deposit Ariz. Rev. Stat. § 33-1126(A)(9) | 300.00 | 40.56 | | | | | |
| Security Deposits with Utilities, Landlords, and Oth Security Deposit with Landlord | <u>ners</u> Ariz. Rev. Stat. § 33-1126(C) | 2,000.00 | 99.00 | | | | | |
| Household Goods and Furnishings Household Goods and Furnishings: dining room table with chairs, loveseat, coffee table, lamps, bed, nightstand, dresser, television, clock, microwave, washing machine, vacuum cleaner, pots & pans, dishware, utensils, decor, bedding Location: 7910 E. Beverly St., Tucson AZ 85710 | Ariz. Rev. Stat. § 33-1123 | 6,000.00 | 305.00 | | | | | |
| <u>Wearing Apparel</u> Womens Clothing Location: 7910 E. Beverly St., Tucson AZ 85710 | Ariz. Rev. Stat. § 33-1125(1) | 500.00 | 100.00 | | | | | |
| Interests in Insurance Policies Term Life Insurance Policy through employer | Ariz. Rev. Stat. § 20-1131 | 100% | 0.00 | | | | | |
| Interests in IRA, ERISA, Keogh, or Other Pension of Intuit Inc. 401K Plan Fidelity | or <u>Profit Sharing Plans</u> Ariz. Rev. Stat. § 33-1126(B) 11 U.S.C. § 522(b)(3)(C) | 100% 100% | 7,865.72 | | | | | |
| Alimony, Maintenance, Support, and Property Settl Back Child Support owed to Debtor | <u>ements</u> Ariz. Rev. Stat. § 33-1126(A)(3) | 100% | 87,000.00 | | | | | |
| Automobiles, Trucks, Trailers, and Other Vehicles 1997 Pontiac Grand Am 4DSD 218,000 Miles Vin #1G2NE52M1VC805522 | Ariz. Rev. Stat. § 33-1125(8) | 6,000.00 | 1,401.00 | | | | | |

Ariz. Rev. Stat. § 33-1125(3)

| Total: 118,331.44 | 96,861.28 |
|--------------------------|-----------|
|--------------------------|-----------|

800.00

50.00

| • | | | |
|-------|--------------------|---------|--|
| In re | Jerie Lynn Redding | Case No | |
| | • | | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D

| CDEDITODIS NAME | CO | Ηι | sband, Wife, Joint, or Community | AMOUNT OF | | | | |
|--|-----------------|-------------|--|------------|--------------|----------|---|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A M | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| Account No. | | | | T | E | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | Value \$ | | | | | |
| 0 | | | S | ubi | tota | ıl | | |
| continuation sheets attached | | | (Total of the | his | pag | ge) | | |
| | | | (Report on Summary of Sc | | ota lule | | 0.00 | 0.00 |

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| In re | Jerie Lynn Redding | Case No. |
|-------|--------------------|----------|
| | <u> </u> | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

| Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this |
|---|
| total also on the Statistical Summary of Certain Liabilities and Related Data. |
| ☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| ☐ Domestic support obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ■ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Jerie Lynn Redding | Case No. |
|-------|--------------------|----------|
| | • | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR NLIQUIDATED ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Informational Purposes Only Account No. **Arizona Department of Revenue** 0.00 PO Box 29070 Phoenix, AZ 85038 0.00 0.00 **Informational Purposes Only** Account No. Internal Revenue Services 0.00 PO Box 24017 Fresno, CA 93779 0.00 0.00 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 0.00 0.00

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Entered 12/03/13 17:18:19

Total

Desc Best Case Bankruptcy

0.00

0.00

(Report on Summary of Schedules)

| In re | Jerie Lynn Redding | Case No. | |
|-------|--------------------|----------|--|
| | | Debtor | |

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COZH_ZGWZ | UNLIQUIDAT | | AMOUNT OF CLAIM |
|---|----------|--------------|---|---------------|-------------|----------|-----------------|
| Account No. | | | Payday Loan | Ť | T E D | | |
| Ace Cash Express, Inc. 850 East Lowell Rd Tucson, AZ 85719 | | - | | | D | | Unknown |
| Account No. xxx38-79 | t | | Payday Loan | t | | | |
| Allied Cash Advance 995 W 4th St Suite A Benson, AZ 85602 | | - | | | | | 782.65 |
| Account No. | ╁ | | Consumer Debt | H | | | |
| Amy Little Baron Gibson Philps 7925 N. Trion St., #209 Charlotte, NC 28262 | | - | | | | | Unknown |
| Account No. xxxxxxxxxxx7503 | ╁ | | Opened 12/01/06 Last Active 4/06/09 | \vdash | | | |
| Bank Of America Po Box 982235 El Paso, TX 79998 | | - | Credit Card | | | | 0.00 |
| | | | | L | L | <u>L</u> | 3.00 |
| 10 continuation sheets attached | | | (Total of t | Subt his j | | | 782.65 |

| In re | Jerie Lynn Redding | Case No. | |
|-------|--------------------|----------|--|
| _ | | Debtor | |

(Continuation Sheet)

| National Collection Payment Pa | | _ | Τ | | 1 | T | T = | $\overline{}$ | |
|--|--|------|---|-----------------------------------|-----|--------|--------|---|-----------------|
| Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | | 000 | | | ZOS | N L | I S | 3 | |
| Second No. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | AND ACCOUNT NUMBER | BTOR | J | CONSIDERATION FOR CLAIM. IF CLAIM | 1 | QUIDA | UTED | ֚֚֚֓֞֝֝֟֝֟֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֓֓֓֡֓֡֓֓֡֓֡ | AMOUNT OF CLAIM |
| Barclays Bank Delaware | Account No. xxxxxxxxxxxx9013 | | | | T | E | | Γ | |
| Calvary Portfolio Services Attention: Bankruptcy Department 500 Summit Lake Dr. Suite 400 Valhalla, NY 10595 Account No. xxx27PT Car Corner 500 N 6th Ave Tucson, AZ 85705 Account No. Cash Time Title Loans, Inc. 4205 W. Glenrosa Ave. Phoenix, AZ 85019 Payday Loan Account No. xxxxxxxxx7945 Chase Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850 Collection Attorney Citifinancial Collection 4ttorney Citifinancial Collect | Attn: Bankruptcy P.O. Box 8801 | | - | Credit Card | | | | | 0.00 |
| Calvary Portfolio Services Attention: Bankruptcy Department 500 Summit Lake Dr. Suite 400 Valhalla, NY 10595 Account No. xxx27PT Car Corner 500 N 6th Ave Tucson, AZ 85705 Cash Time Title Loans, Inc. 4205 W. Glenrosa Ave. Phoenix, AZ 85019 Payday Loan Payday Loan Payday Loan Opened 10/01/97 Last Active 2/29/04 Credit Card Credit Card Credit Card Opened 10/01/97 Last Active 2/29/04 Credit Card Subtotal Sheet no. 1 of 10 sheets attached to Schedule of | Account No. xxxx4080 | ┢ | | | T | | H | \dagger | |
| Automobile - | Attention: Bankruptcy Department 500 Summit Lake Dr. Suite 400 | | - | Collection Attorney Citifinancial | | | | | 0.00 |
| Car Corner 500 N 6th Ave Tucson, AZ 85705 | Account No. xxx27PT | Γ | | | | | | T | |
| Cash Time Title Loans, Inc. 4205 W. Glenrosa Ave. Phoenix, AZ 85019 Unknown Account No. xxxxxxxxx7945 Chase Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850 Sheet no. 1_ of 10_ sheets attached to Schedule of Subtotal | 500 N 6th Ave | | - | Automobile | | | | | 5,987.00 |
| 4205 W. Glenrosa Ave. Phoenix, AZ 85019 Unknown Account No. xxxxxxxx7945 Chase Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850 Sheet no1 of _10_ sheets attached to Schedule of Subtotal | Account No. | | | Payday Loan | | | | † | |
| Chase Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850 Sheet no1 of _10_ sheets attached to Schedule of Subtotal | 4205 W. Glenrosa Ave. | | - | | | | | | Unknown |
| Chase Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850 Sheet no1 of _10_ sheets attached to Schedule of Subtotal 6.820.84 | Account No. xxxxxxxx7945 | | | | | | l | T | |
| 6.820.84 | Attn: Bankruptcy Dept Po Box 15298 | | - | Credit Card | | | | | 833.84 |
| | | | | | | | | | 6,820.84 |

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| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | 42m02-4200 | UNL-QU-DATE | AMOUNT OF CLAIM |
|---|----------|------------------|---|---|------------|-------------|-----------------|
| Account No. Convergent Outsourcing, Inc. 10750 Hammerly Blvd. #200 Houston, TX 77043 | | | Additional Notice: Chase | - | _ | E D | Notice Only |
| Account No. xxxxxxxxxxxxx0559 Chase Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850 | | - | Opened 4/01/99 Last Active 12/26/06 Credit Card | | | | 0.00 |
| Account No. Check Into Cash of Arizona, Inc. 2245 E. Irvington Road, Suite 110 Tucson, AZ 85714 | | - | Payday Loan | | | | Unknown |
| Account No. xx1554 Checkmate 3580 N 1st Ave Tucson, AZ 85719 | | - | Payday Loan | | | | 784.42 |
| Account No. xxxxxxxxxxxxx3383 Citifinancial 300 Saint Paul Pl Baltimore, MD 21202 | | - | Opened 8/11/08 Last Active 5/18/09 Unsecured | | | | 0.00 |
| Sheet no. 2 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Tota) | | | ota pag | 784.42 |

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| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | C | Ηυ | sband, Wife, Joint, or Community | | CO | U | D | Τ | |
|---|-----------|-------------|---|------------------|----|-------------|---|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BT OR | C A M | DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE | AIM | | DZ1-QD-D4HE | | | AMOUNT OF CLAIM |
| Account No. xxxxxx7461 | | Γ | Opened 11/15/06 Last Active 6/22/10 | | Т | T E | | Γ | |
| Citimortgage Inc Po Box 9438,dept 0251 Gaithersburg, MD 20898 | | - | Real Estate Mortgage | | | D | | | 0.00 |
| Account No. | | | Consumer Debt | | | | | T | |
| City of Tucson Utility Services PO Box 28804 Tucson, AZ 85726 | | - | | | | | | | |
| | | | | | | | | | Unknown |
| Account No. xxxxx8225 Comenity Bank / Lane Bryant Attention: Bankruptcy P.O. Box 182686 Columbus, OH 43218 | | - | Opened 9/01/03 Last Active 3/28/04 Charge Account | | | | | | 0.00 |
| Account No. xxxx1170 | | ┢ | Opened 1/01/01 Last Active 3/28/06 | | | Н | | $^{+}$ | |
| Compass Bank 15 20th St S FI 9 Birmingham, AL 35233 | | - | Automobile | | | | | | 0.00 |
| Account No. xxxxxxxxxxxxxxx2200 Dept Of Ed/sallie Mae Po Box 9635 Wilkes Barre, PA 18773 | | - | Opened 7/06/09 Last Active 6/13/13 Educational | | | | | | |
| | | | | | | | | | 0.00 |
| Sheet no. 3 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (T | Su otal of th | | ota | | | 0.00 |

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| In re | Jerie Lynn Redding | Case No. | |
|-------|--------------------|----------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | C | Ηι | sband, Wife, Joint, or Community | CO | U | D | |
|---|---------|------------------|---|-----------|----------------|----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | C 1 M H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NT INGENT | NL I QU I DATE | | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxxxx1200 | | | Opened 7/06/09 Last Active 6/13/13 | Т | T E | | |
| Dept Of Ed/sallie Mae Po Box 9635 Wilkes Barre, PA 18773 | | - | Educational | | D | | 0.00 |
| Account No. xxxxxxxx0306 | | | Med1 02 Nextcare Urgent Care Of Ariz | | | | |
| Divry Fn Svc 7077 E Bell Rd Scottsdale, AZ 85254 | | - | | | | | |
| | | | | | | | 117.00 |
| Account No. xxxxxxxx0307 | | | Med1 02 Nextcare Urgent Care Of Ariz | | | | |
| Divry Fn Svc 7077 E Bell Rd Scottsdale, AZ 85254 | | - | | | | | co 00 |
| | | | | | | | 69.00 |
| Account No. xxxxxxxxx3286 EMC Mortgage/Chase 3415 Vision Drive Mail Code OH4-7126 Columbus, OH 43219 | | - | Opened 12/01/01 Last Active 11/14/06 Real Estate Mortgage | | | | 0.00 |
| Account No. xxxxxxxxxxxx6092 | T | T | Opened 1/01/02 Last Active 8/10/06 | | | | |
| First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107 | | - | Credit Card | | | | 0.00 |
| Sheet no4 of _10 _ sheets attached to Schedule of | | | | Sub | tota | 1 | 186.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 100.00 |

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| In re | Jerie Lynn Redding | Case No. | |
|-------|--------------------|----------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | č | Ηι | sband, Wife, Joint, or Community | Ç | Ü | D | |
|--|---------|-------------|---|------------|----------------|------------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | C A M | IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | NL - QU - DATE | S P U T | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx4185 | | | Opened 11/01/06 Last Active 5/13/09 | Т | T E | | |
| Gecrb/mervyns Po Box 965005 Orlando, FL 32896 | | - | Charge Account | | D | | 0.00 |
| Account No. xxxxxxxxxxxx6615 | | | Opened 9/01/07 Last Active 10/26/08 | | | | |
| GECRB/Sam Levitz Furniture Attn: Bankruptcy Po Box 103104 Roswell, GA 30076 | | - | Charge Account | | | | |
| | | | | | | | Unknown |
| Account No. xxxxx27N1 Gen Business Recoverie Attn: Bankruptcy Po Box 41960 Tucson, AZ 85717 | | - | Opened 4/01/13 Collection Attorney Valley Animal Hospital | | | | 571.00 |
| Account No. xx4927 | | | Collections | | | | |
| General Business Recoveries 2033 E. Speedway Blvd Ste 103 Tucson, AZ 85719 | | - | | | | | Unknown |
| Account No. xxxxxxxxxxxxx8888 | T | T | Opened 5/01/13 Last Active 5/13/13 | | | | |
| Glhegc Po Box 7860 Madison, WI 53707 | | - | Educational U.S. Bank | | | | 5,794.00 |
| Sheet no. <u>5</u> of <u>10</u> sheets attached to Schedule of | | | 2 | Sub | tota | 1 | 6,365.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 0,303.00 |

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| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | C | Нι | sband, Wife, Joint, or Community | | CON | U | D | |
|--|---------|-------------|------------------------------------|--------------|-----------|-------------|----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | C A M | I INATE OF A IMAMA A CINICI DODEIN | CLAIM | OZH-ZGEZH | ONL-QU-DATE | | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxx8888 | | | Opened 5/01/13 Last Active 5/13/13 | | Т | T E | | |
| Glhegc Po Box 7860 Madison, WI 53707 | | - | Educational U.S. Bank | | | D | | 5,457.00 |
| Account No. xxxxxxxxxxx7291 | | | Opened 4/10/03 Last Active 8/10/06 | | | | | |
| Hsbc Bank Po Box 30253 Salt Lake City, UT 84130 | | - | Credit Card | | | | | 0.00 |
| Account No. xxxxxxxxxxxx0003 | | T | Opened 1/17/08 Last Active 5/13/13 | | | | | |
| Isl/u S Bank 6805 Vista Dr # I West Des Moines, IA 50266 | | - | Educational | | | | | 0.00 |
| Account No. xxxxxxxxxxxxx0004 | | Г | Opened 1/17/08 Last Active 5/13/13 | | | | | |
| Isl/u S Bank 6805 Vista Dr # I West Des Moines, IA 50266 | | - | Educational | | | | | 0.00 |
| Account No. xxxxxxxxxxxxx0002 | | T | Opened 1/17/08 Last Active 4/22/11 | | | | | |
| Isl/u S Bank 6805 Vista Dr # I West Des Moines, IA 50266 | | - | Educational | | | | | 0.00 |
| Sheet no. 6 of 10 sheets attached to Schedule of | | | | S | ubt | ota | 1 | 5,457.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | | (Total of th | is 1 | pag | e) | 3,737.00 |

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| In re | Jerie Lynn Redding | Case No. | |
|-------|--------------------|----------|--|
| | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | C | Ηι | sband, Wife, Joint, or Community | CO | U | D | |
|--|-----------|-------------|---|------------|-------------|-----------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BT OR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONT INGENT | LQU | S P U T E | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxx0001 | | | Opened 1/17/08 Last Active 4/22/11 | Т | ΙE | | |
| Isl/u S Bank 6805 Vista Dr # I West Des Moines, IA 50266 | | - | Educational | | D | | 0.00 |
| Account No. xx5543 National Credit Adjust Po Box 3023 Hutchinson, KS 67504 | | - | Opened 7/01/12 Factoring Company Account Allied Cash Advance | | | | |
| | | | | | L | | 782.00 |
| Nemo's Coll 14631 N Cave Creek Phoenix, AZ 85022 | | - | Med1 02 Nextcare Az | | | | 95.00 |
| Account No. xxxxxxxxxxxx6615 Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 | | - | Opened 9/01/11 Factoring Company Account Ge Capital Corp | | | | 1,147.00 |
| Account No. xxxxxxxxxxxx7677 Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 | - | - | Opened 3/01/11 Factoring Company Account Fia Card Services N.A. | | | | 716.00 |
| Sheet no7 of _10_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | | tota nao | | 2,740.00 |
| Ciculiois Holding Onseculed Nonditionity Claims | | | (101a1011 | 1115 | pag | CI | l |

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| In re | Jerie Lynn Redding | Case No. | |
|-------|--------------------|----------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | 000 | 1 | usband, Wife, Joint, or Community | CON | U N L | D | |
|--|--------------|-------------|---|----------|-------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | OD E B T O R | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | NTINGENT | Q | U T | AMOUNT OF CLAIM |
| Account No. xx xx-xx4472 | | | Consumer Debt | Т | E D | | |
| Rancho Antigua Association c/o Brown Olcott, PLLC 190 W. Magee Road, 182 Tucson, AZ 85704 | | - | | | | | 3,878.35 |
| Account No. xxxxxxxxxxxxxxxxxx0706 | | | Opened 7/01/09 Last Active 9/01/10 | | | | |
| Sallie Mae 11100 Usa Pkwy Fishers, IN 46037 | | - | Educational | | | | Unknown |
| Account No. xxxxxxxxxxxxxxxxx0706 | ┢ | ╁ | Opened 7/01/09 Last Active 9/01/10 | ╁ | ┢ | - | |
| Sallie Mae 11100 Usa Pkwy Fishers, IN 46037 | | - | Educational | | | | Unknown |
| Account No. | | | Consumer Debt | | T | T | |
| Southwest Gas 3401 E Gas Road Tucson, AZ 85714 | | - | | | | | Unknown |
| Account No. xxxxx9399 | T | | Opened 3/01/12 | T | T | T | |
| Sunrise Credit Service 234 Airport Plaza Blvd S Farmingdale, NY 11735 | | - | Collection Attorney T-Mobile | | | | 868.00 |
| Sheet no. _8 of _10 _ sheets attached to Schedule of | | | | Sub | tota | ıl | 4,746.35 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | 7,7 70.33 |

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| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

(Continuation Sheet)

| CREDITOR'S NAME, | ç | Hu | sband, Wife, Joint, or Community | ç | U | Ţ | РΤ | |
|--|---------|-------------|---|------------|------|-------------|-----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | J M H | IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | | F F U | | AMOUNT OF CLAIM |
| Account No. | | | Collecting For: T-Mobile | Т | ΙE | | | |
| Sunrise Credit Services, Inc. P.O. Box 9100 Farmingdale, NY 11735 | | - | | | D | | | 868.25 |
| Account No. | | | | | | T | T | |
| T-Mobile P.O. Box 51843 Los Angeles, CA 90051 | | | Additional Notice: Sunrise Credit Services, Inc. | | | | | Notice Only |
| Account No. xx1805 | | | Consumer Debt | | | Ī | T | |
| The Cash Line Kelly Smith-Legal Research Group P.O. Box 79352 Houston, TX 77007 | | - | | | | | | 310.27 |
| Account No. xxxxxxxxxxxx0001 | | Г | Opened 5/01/06 Last Active 11/10/10 | | T | T | T | |
| Toyota Motor Credit Co Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52408 | | - | Automobile | | | | | 0.00 |
| Account No. xxxx7960 | | Т | Opened 7/01/09 | T | T | T | † | |
| U S Dept Of Ed/GsI/AtI Po Box 4222 Iowa City, IA 52244 | | - | Educational | | | | | 3,961.00 |
| Sheet no. 9 of 10 sheets attached to Schedule of | | | | Sub | tota | al | 7 | 5,139.52 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pas | ge` |) L | 3,133.32 |

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| In re | Jerie Lynn Redding | | Case No. | |
|-------|--------------------|--------|---------------|--|
| • | | Dobtor | / | |

(Continuation Sheet)

| | | | | | | | _, | |
|---|----------|-------------|---|-------------|--------|--------|-----|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | _ c | UN | | 7 | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | QU L D | SPUTED | 7 | AMOUNT OF CLAIM |
| Account No. xxxx3800 | | | Opened 7/01/09 | Т | ΙE | | | |
| U S Dept Of Ed/GsI/AtI Po Box 4222 Iowa City, IA 52244 | | - | Educational | | D | | | 2,111.00 |
| Account No. xxxx4879 | | | Opened 10/01/04 Last Active 10/22/05 | Τ | | | | |
| United Consumer Financial Services 865 Bassett Rd Westlake, OH 44145 | | - | Installment Sales Contract | | | | | |
| | L | | | ┸ | | | | 0.00 |
| Valley Animal Hospital P.C. 4984 E. 22nd St. Tucson, AZ 85711 | | _ | Consumer Debt | | | | | |
| | | | | | | | | Unknown |
| Account No. xxxxxx8453 Valley Collection Serv Po Box 520 Glendale, AZ 85311 | | - | Opened 4/01/12 Collection Attorney City Of Tucson | | | | | |
| | | | | | | | | 493.00 |
| Account No. xxxxxxxxxxxxxx1998 Wells Fargo Bank Nv Na Attn: Deposits Bankruptcy MAC# P6103-05K Po Box 3908 | | - | Opened 7/01/07 Last Active 1/31/09 Credit Line Secured | | | | | |
| Portland, OR 97208 | | | | | | | | 17,965.00 |
| Sheet no10_ of _10_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | <u></u> | (Total of | Sub this | | |) | 20,569.00 |
| | | | (1001 | | Tot | | ´ | |
| | | | (Report on Summary of S | | | | , [| 53,590.78 |

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| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|---------|--|
| - | | Debtor | |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Noel Oler 7910 E. Beverly St. Tucson, AZ 85710 Residential Lease, Expires 02/2014

| In re | Jerie Lynn Redding | Case No | |
|-------|--------------------|---------|--|
| - | | Debtor | |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTO | N | AME | AND | ADDRESS | OF | CODEBTO | R |
|-----------------------------|---|-----|-----|---------|----|---------|---|
|-----------------------------|---|-----|-----|---------|----|---------|---|

NAME AND ADDRESS OF CREDITOR

| 200 | N |
|---------|---|
| | |

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| 7 | DEDENDE | NITE OF DEDTOD AND SE | OLICE | | |
|--|---|-----------------------|----------|----------|------------|
| Debtor's Marital Status: | | ENTS OF DEBTOR AND SE | OUSE | | |
| Divorced | RELATIONSHIP(S): Son | AGE(S): 21 | | | |
| | | | | | |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation | Online Payment Solution | | | | |
| Name of Employer | Intuit | | | | |
| How long employed | 2011-Present | | | | |
| Address of Employer | 2500 E. Commerce Center Rd. Tucson, AZ 85706 | | | | |
| | ge or projected monthly income at time case filed) | | DEBTOR | | SPOUSE |
| | y, and commissions (Prorate if not paid monthly) | \$ | 3,196.07 | \$ | N/A |
| 2. Estimate monthly overtime | | \$ | 0.00 | \$ | N/A |
| 3. SUBTOTAL | | \$ | 3,196.07 | \$ | N/A |
| 4. LESS PAYROLL DEDUCT | ΓΙΟΝS | | | | |
| Payroll taxes and social | al security | \$ | 297.79 | \$ | N/A |
| b. Insurance | | \$ | 312.33 | \$ | N/A |
| c. Union dues | | \$ | 0.00 | \$ | N/A |
| d. Other (Specify): | 401(k) | \$ | 191.06 | \$ | N/A |
| | | | 0.00 | \$ | N/A |
| 5. SUBTOTAL OF PAYROLI | L DEDUCTIONS | \$_ | 801.18 | \$ | N/A |
| 6. TOTAL NET MONTHLY | ГАКЕ НОМЕ РАҮ | \$_ | 2,394.89 | \$ | N/A |
| 7. Regular income from operat | tion of business or profession or farm (Attach detailed | d statement) \$ | 0.00 | \$ | N/A |
| 8. Income from real property | | \$ | 0.00 | \$ | N/A |
| 9. Interest and dividends | | \$ | 0.00 | \$ | N/A |
| dependents listed above | support payments payable to the debtor for the debtor | 's use or that of | 0.00 | \$ | N/A |
| 11. Social security or governm | | ¢. | 0.00 | Ф | NI/A |
| (Specify): | | | 0.00 | \$ \$ | N/A N/A |
| 12. Pension or retirement inco | ma | | 0.00 | φ — | N/A |
| 13. Other monthly income | ine | Φ | 0.00 | Φ | IN/A |
| (Specify): | | \$ | 0.00 | \$ | N/A |
| (Specify). | | \$ | 0.00 | \$ | N/A |
| 14. SUBTOTAL OF LINES 7 | THROUGH 13 | \$ | 0.00 | \$ | N/A |
| | NCOME (Add amounts shown on lines 6 and 14) | \$ | 2,394.89 | <u> </u> | N/A |
| 15. AVERAGE MONTHET II | (and amounts shown on thes o and 14) | <u> </u> | | | |
| 16. COMBINED AVERAGE | MONTHLY INCOME: (Combine column totals from | n line 15) | \$ | 2,394.8 | 9 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| B6J | (Officia | al Form | 6 J) (| 12/07) |
|-----|----------|---------|----------------|---------|
| T. | *** | laria I | \mn | Dodding |

| Debtor(s) | |
|-----------|--|

| Case No. | |
|----------|--|
| | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| 1. Rent or home | e mortgage payment (include lot rent | ed for mobile home) | | | \$ | 720.00 |
|-------------------|--|--------------------------|-------------|-------------------|----------------|----------|
| | ate taxes included? | Yes | No | X | T | |
| | insurance included? | Yes — | | X | | |
| 2. Utilities: | a. Electricity and heating fuel | | | | \$ | 50.00 |
| | b. Water and sewer | | | | \$ | 0.00 |
| | c. Telephone | | | | \$ | 29.00 |
| | d. Other See Detailed Expense | Attachment | | | \$ | 168.00 |
| 3. Home mainte | enance (repairs and upkeep) | | | | \$ | 0.00 |
| 4. Food | | | | | \$ | 556.00 |
| 5. Clothing | | | | | \$ | 160.00 |
| 6. Laundry and | dry cleaning | | | | \$ | 25.00 |
| 7. Medical and | dental expenses | | | | \$ | 0.00 |
| 8. Transportation | on (not including car payments) | | | | \$ | 340.00 |
| | clubs and entertainment, newspapers, | magazines, etc. | | | \$ | 150.00 |
| 10. Charitable | | | | | \$ | 150.00 |
| 11. Insurance (| not deducted from wages or included | in home mortgage pay | ments) | | | |
| ` | a. Homeowner's or renter's | | , | | \$ | 10.00 |
| | b. Life | | | | \$ | 0.00 |
| | c. Health | | | | \$ | 0.00 |
| | d. Auto | | | | \$ | 50.00 |
| | e. Other | | | | \$ | 0.00 |
| 12. Taxes (not | deducted from wages or included in l | home mortgage paymer | nts) | | | |
| | (Specify) | 8.8.1.7 | , | | \$ | 0.00 |
| 13. Installment | payments: (In chapter 11, 12, and 13 | cases, do not list payn | nents to be | included in the | | |
| plan) | paymones (in onapor 11, 12, and 10 | cuses, do not list puji | | | • | |
| pran) | a. Auto | | | | \$ | 0.00 |
| | 1. 0.1 | | | | \$ | 0.00 |
| | c. Other | | | | \$ | 0.00 |
| 14 Alimony n | naintenance, and support paid to othe | re | | | - \$ | 0.00 |
| | or support of additional dependents n | | | | ф • | 0.00 |
| • | penses from operation of business, pr | ~ · | h detailed | statement) | \$ \$ | 0.00 |
| 17. Other | • • | | ii uctancu | statement) | \$ \$ | 0.00 |
| Other | | | | | - \$ \$ | 0.00 |
| | | | | | <u> </u> | 0.00 |
| | E MONTHLY EXPENSES (Total lin | | | of Schedules a | and, \$ | 2,408.00 |
| if applicable, or | n the Statistical Summary of Certain | Liabilities and Related | Data.) | | - | |
| 19. Describe ar | ny increase or decrease in expenditure | es reasonably anticipate | ed to occur | r within the year | r | |
| following the fi | iling of this document: | | | · | | |
| 20. STATEME | ENT OF MONTHLY NET INCOME | | | | | |
| a. Average m | nonthly income from Line 15 of Sche | dule I | | | \$ | 2,394.89 |
| | nonthly expenses from Line 18 above | | | | \$ | 2,408.00 |
| | et income (a. minus b.) | | | | s | -13.11 |

| B6J | (Officia | al Form | 6J) (| (12/07) |
|------|----------|---------|---------------|---------|
| T.o. | *** | laria I | mn | Dodding |

Debtor(s)

| Case No. | |
|----------|--|
| | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Utility Expenditures:

| Cellular Phone | \$ | 70.00 |
|----------------------------------|----------|--------|
| Cable | <u> </u> | 59.00 |
| Internet | \$ | 39.00 |
| Total Other Utility Expenditures | \$ | 168.00 |

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | | | Case No. | |
|-------|--|-----------|--|----------|-------------------|
| | | | Debtor(s) | Chapter | _ 7 |
| | DECLARATION (DECLARATION UNDER | | | | |
| | I declare under penalty of perjury sheets, and that they are true and correct to | | | | es, consisting of |
| Date | December 2, 2013 | Signature | /s/ Jerie Lynn Redding Jerie Lynn Redding Debtor | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | Case | No. | |
|-------|--------------------|----------------|-----|---|
| | | Debtor(s) Chap | ter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

\$31,081.47 2013 YTD: Debtor Employment Income \$28,229.00 2012: Debtor Employment Income \$20,007.00 2011: Debtor Employment Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

\$300.00 2013 YTD: Debtor Child Support

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Best Case Bankruptcy

AMOUNT SOURCE

\$400.00 2012: Debtor Child Support 2011: Debtor Child Support \$3,216.00

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL AMOUNT PAID OF CREDITOR **PAYMENTS** OWING **Noel Oler** 09/13-11/13 \$2,160.00 \$0.00 7910 E. Beverly St. **Rent Payment Tucson, AZ 85710**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF TRANSFERS OWING TRANSFERS

NAME AND ADDRESS OF CREDITOR

spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT AMOUNT PAID

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER AND LOCATION DISPOSITION **PROCEEDING** Rancho Antigua Assocation v. Jeri L. Redding In the Pima Consolidated Justice Court Garnishment Civil Case No. CV12-014472 County of Pima, State of Arizona

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT STILL

OWING

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Church of Jesus Christ of LDS **105 North Norton Avenue Tucson, AZ 85719**

RELATIONSHIP TO DEBTOR, IF ANY Non-Relation

DATE OF GIFT 2012-2013

DESCRIPTION AND VALUE OF GIFT

Tithina

\$100-150/Month

8. Losses

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Law Offices of Matthew Foley, PLC 4400 E. Broadway, Suite 811 Tucson, AZ 85711

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR Attorney fees paid by ARAG

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$1,500.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None П

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 7811 S. Cesear Drive **Tucson, AZ 85747**

NAME USED Same

DATES OF OCCUPANCY

2001-2011

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Software Copyright (c) 1996-2013 Best Case, LLC - www.bestcase Case 4:13-bk-20788-BMW

0

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 2, 2013

Signature Is/ Jerie Lynn Redding

Jerie Lynn Redding

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court District of Arizona

| | District o | f Arizona | | |
|---|--|---|----------------------------|--------------------------------------|
| In re Jerie Lynn Redding | D | ebtor(s) | Case No. Chapter | 7 |
| PART A - Debts secured by pro | | ust be fully comp | | |
| Property No. 1 | Attach additional pages if nec | essary.) | | |
| Creditor's Name: -NONE- | | Describe Propert | y Securing Debt | : |
| Property will be (check one): ☐ Surrendered | ☐ Retained | | | |
| If retaining the property, I intend t ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain | o (check at least one): (for example, avoi | d lien using 11 U.S | S.C. § 522(f)). | |
| Property is (check one): ☐ Claimed as Exempt | | ☐ Not claimed as | exempt | |
| PART B - Personal property subje Attach additional pages if necessar | | columns of Part B | must be complete | ed for each unexpired lease. |
| Property No. 1 | | | | |
| Lessor's Name: Noel Oler | Describe Leased Progressidential Lease, E | | Lease will be U.S.C. § 365 | e Assumed pursuant to 11 $S(p)(2)$: |
| I declare under penalty of perjur personal property subject to an u Date December 2, 2013 | inexpired lease. | ntention as to any s/ Jerie Lynn Red | | estate securing a debt and/o |
| Date December 2, 2013 | Signature / | si Jerie Lynn Red | unig | |

Jerie Lynn Redding

Debtor

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | District of Titleona | Case No | | |
|-------|---|---|---|------------------------|-------------------|
| | cens zym nedding | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTO | RNEY FOR D | DEBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 201 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | y, or agreed to be pa | id to me, for services | |
| | For legal services, I have agreed to accept | | | 1,500.00 | |
| | Prior to the filing of this statement I have received | | \$ | 0.00 | |
| | Balance Due | | \$ | 1,500.00 | |
| 2. | \$306.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ☐ Debtor ■ Other (specify): ARAG | | | | |
| 5. | ■ I have not agreed to share the above-disclosed comp | ensation with any other person | n unless they are me | mbers and associates | s of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | | y law firm. A |
| 6. | In return for the above-disclosed fee, I have agreed to re | nder legal service for all aspec | cts of the bankruptcy | case, including: | |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor | ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex ons as needed; preparation | ch may be required; and any adjourned h | earings thereof; | d filing of |
| 7. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding. | | | nces, relief from s | tay actions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any bankruptcy proceeding. | agreement or arrangement for | or payment to me for | representation of the | e debtor(s) in |
| Date | d: December 2, 2013 | /s/ Matthew Fole | y | | |
| | | Matthew Foley C Law Offices of M 4400 E. Broadwa Tucson, AZ 857 (520) 404-0529 | 123212 Matthew Foley, Pl ay, Suite 811 11 Fax: (888) 329-46 | | |
| | | matt@foleyplc.c | om | | |

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

Case No. (if known)

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | | Case N | 0. | | | | | |
|---------|---|------------------|--------------------------------|-----------------------------------|--|--|--|--|--|
| = | | Debto | or(s) Chapte | 7 | | | | | |
| | CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE | | | | | | | | |
| | C | Certification of | Debtor | | | | | | |
| | I (We), the debtor(s), affirm that I (we) have re- | eceived and read | the attached notice, as requi- | red by § 342(b) of the Bankruptcy | | | | | |
| Code. | | | • | | | | | | |
| Jerie L | ynn Redding | X | /s/ Jerie Lynn Redding | December 2, 2013 | | | | | |
| Printed | Name(s) of Debtor(s) | - | Signature of Debtor | Date | | | | | |

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court District of Arizona

| In re | Jerie Lynn Redding | | Case No. | |
|----------|---------------------------------------|---|------------------|------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | | DECLARATION | | |
| | I, Jerie Lynn Redding , do he | ereby certify, under penalty of perjury, that the | e Master Mailing | List, consisting of 5 |
| sheet(s) |), is complete, correct and consister | nt with the debtor(s)' schedules. | | |
| | | | | |
| Date: | December 2, 2013 | /s/ Jerie Lynn Redding | | |
| | | Jerie Lynn Redding | | |
| | | Signature of Debtor | | |
| Date: | December 2, 2013 | /s/ Matthew Foley | | |
| | | Signature of Attorney | | |
| | | Matthew Foley 023212 | DI O | |
| | | Law Offices of Matthew Foley 4400 E. Broadway, Suite 811 | , PLC | |
| | | Tucson, AZ 85711 | | |
| | | (520) 404-0529 Fax: (888) 329 | 9-4606 | |

MML-5

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Best Case Bankruptcy

ACE CASH EXPRESS, INC. 850 EAST LOWELL RD TUCSON AZ 85719

ALLIED CASH ADVANCE 995 W 4TH ST SUITE A BENSON AZ 85602

AMY LITTLE
BARON GIBSON PHILPS
7925 N. TRION ST., #209
CHARLOTTE NC 28262

ARIZONA DEPARTMENT OF REVENUE PO BOX 29070 PHOENIX AZ 85038

BANK OF AMERICA PO BOX 982235 EL PASO TX 79998

BARCLAYS BANK DELAWARE ATTN: BANKRUPTCY P.O. BOX 8801 WILMINGTON DE 19899

CALVARY PORTFOLIO SERVICES ATTENTION: BANKRUPTCY DEPARTMENT 500 SUMMIT LAKE DR. SUITE 400 VALHALLA NY 10595

CAR CORNER 500 N 6TH AVE TUCSON AZ 85705

CASH TIME TITLE LOANS, INC. 4205 W. GLENROSA AVE. PHOENIX AZ 85019

CHASE ATTN: BANKRUPTCY DEPT PO BOX 15298 WILMINGTON DE 19850 CHECK INTO CASH OF ARIZONA, INC. 2245 E. IRVINGTON ROAD, SUITE 110 TUCSON AZ 85714

CHECKMATE 3580 N 1ST AVE TUCSON AZ 85719

CITIFINANCIAL 300 SAINT PAUL PL BALTIMORE MD 21202

CITIMORTGAGE INC PO BOX 9438, DEPT 0251 GAITHERSBURG MD 20898

CITY OF TUCSON UTILITY SERVICES PO BOX 28804
TUCSON AZ 85726

COMENITY BANK / LANE BRYANT ATTENTION: BANKRUPTCY P.O. BOX 182686 COLUMBUS OH 43218

COMPASS BANK 15 20TH ST S FL 9 BIRMINGHAM AL 35233

CONVERGENT OUTSOURCING, INC. 10750 HAMMERLY BLVD. #200 HOUSTON TX 77043

DEPT OF ED/SALLIE MAE PO BOX 9635 WILKES BARRE PA 18773

DLVRY FN SVC 7077 E BELL RD SCOTTSDALE AZ 85254

EMC MORTGAGE/CHASE 3415 VISION DRIVE MAIL CODE OH4-7126 COLUMBUS OH 43219 FIRST PREMIER BANK 3820 N LOUISE AVE SIOUX FALLS SD 57107

GECRB/MERVYNS PO BOX 965005 ORLANDO FL 32896

GECRB/SAM LEVITZ FURNITURE ATTN: BANKRUPTCY PO BOX 103104 ROSWELL GA 30076

GEN BUSINESS RECOVERIE ATTN: BANKRUPTCY PO BOX 41960 TUCSON AZ 85717

GENERAL BUSINESS RECOVERIES 2033 E. SPEEDWAY BLVD STE 103 TUCSON AZ 85719

GLHEGC PO BOX 7860 MADISON WI 53707

HSBC BANK PO BOX 30253 SALT LAKE CITY UT 84130

INTERNAL REVENUE SERVICES PO BOX 24017 FRESNO CA 93779

ISL/U S BANK 6805 VISTA DR # I WEST DES MOINES IA 50266

NATIONAL CREDIT ADJUST PO BOX 3023 HUTCHINSON KS 67504

NEMO'S COLL 14631 N CAVE CREEK PHOENIX AZ 85022 PORTFOLIO RECOVERY ATTN: BANKRUPTCY PO BOX 41067 NORFOLK VA 23541

RANCHO ANTIGUA ASSOCIATION C/O BROWN OLCOTT, PLLC 190 W. MAGEE ROAD, 182 TUCSON AZ 85704

SALLIE MAE 11100 USA PKWY FISHERS IN 46037

SOUTHWEST GAS 3401 E GAS ROAD TUCSON AZ 85714

SUNRISE CREDIT SERVICE 234 AIRPORT PLAZA BLVD S FARMINGDALE NY 11735

SUNRISE CREDIT SERVICES, INC. P.O. BOX 9100 FARMINGDALE NY 11735

T-MOBILE
P.O. BOX 51843
LOS ANGELES CA 90051

THE CASH LINE
KELLY SMITH-LEGAL RESEARCH GROUP
P.O. BOX 79352
HOUSTON TX 77007

TOYOTA MOTOR CREDIT CO TOYOTA FINANCIAL SERVICES PO BOX 8026 CEDAR RAPIDS IA 52408

U S DEPT OF ED/GSL/ATL PO BOX 4222 IOWA CITY IA 52244 UNITED CONSUMER FINANCIAL SERVICES 865 BASSETT RD WESTLAKE OH 44145

VALLEY ANIMAL HOSPITAL P.C. 4984 E. 22ND ST. TUCSON AZ 85711

VALLEY COLLECTION SERV PO BOX 520 GLENDALE AZ 85311

WELLS FARGO BANK NV NA ATTN: DEPOSITS BANKRUPTCY MAC# P6103-05K PO BOX 3908 PORTLAND OR 97208

| In re | Jerie Lynn Redding | |
|--------|--------------------|--|
| Case N | Debtor(s) umber: | According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement): |
| | (If known) | ☐ The presumption arises. |
| | | ■ The presumption does not arise. |
| | | \square The presumption is temporarily inapplicable. |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

| | Part I. MILITARY AND NON-CONSUMER DEBTORS | | | | | |
|----|--|--|--|--|--|--|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | | | | | |
| | □ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). | | | | | |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | | | | | |
| | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. | | | | | |
| | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. | | | | | |
| 1C | □ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard | | | | | |
| | a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; | | | | | |
| | OR | | | | | |
| | b. □ I am performing homeland defense activity for a period of at least 90 days /or/ □ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. | | | | | |

| | Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION | | | | | | | | | |
|----|--|--|----------|---|-----------------|--------------------------------|---------|--------------------|----------|--------------------|
| | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. | | | | | | | | | |
| | a. | | | | | | | | | |
| 2 | r F | Married, not filing jointly, with declaration My spouse and I are legally separated under surpose of evading the requirements of § 7070 or Lines 3-11. | appl | icable non-bankruj | ptcy | law or my spouse and | d I a | are living apart o | ther | than for the |
| | c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. ☐ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B | | | | | | | _ | | |
| | | gures must reflect average monthly income re | | | | | Spo | | | |
| | | lar months prior to filing the bankruptcy case | | | | | | Column A | | Column B |
| | | ing. If the amount of monthly income varied | | | , yo | u must divide the | | Debtor's Income | | Spouse's Income |
| | S1X-III | onth total by six, and enter the result on the a | ppro | opriate fine. | | | | | | |
| 3 | | s wages, salary, tips, bonuses, overtime, con | | | | | \$ | 3,067.74 | \$ | |
| 4 | enter busine not en | the from the operation of a business, profess the difference in the appropriate column(s) of less, profession or farm, enter aggregate numb ter a number less than zero. Do not include to as a deduction in Part V. | Liners a | ne 4. If you operate and provide details | e mo | ore than one an attachment. Do | | | | |
| | | | | Debtor | | Spouse | | | | |
| | a. | Gross receipts | \$ | 0.00 | | | | | | |
| | b. c. | Ordinary and necessary business expenses | \$ | 0.00 btract Line b from | | | \$ | 0.00 | ¢. | |
| | | Business income | | | | | Þ | 0.00 | Þ | |
| | Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. | | | | | | | | | |
| 5 | | | d. | Debtor | Ф. | Spouse | | | | |
| | a. b. | Gross receipts Ordinary and necessary operating expenses | \$ | 0.00 0.00 | | | | | | |
| | c. | Rent and other real property income | | btract Line b from | | e a | \$ | 0.00 | \$ | |
| 6 | Intere | est, dividends, and royalties. | | | | <u> </u> | \$ | 0.00 | \$ | |
| 7 | | on and retirement income. | | | | | \$ | 0.00 | | |
| · | Any amounts paid by another person or entity, on a regular basis, for the household | | | household | Ψ | 0.00 | Ψ | | | |
| _ | expenses of the debtor or the debtor's dependents, including child support paid for that | | | | t paid for that | | | | | |
| 8 | purpose. Do not include alimony or separate maintenance payments or amounts paid by your | | | | | | | | | |
| | spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. | | | | | \$ | 45.83 | \$ | | |
| | _ | aployment compensation. Enter the amount i | | • | | s) of Line 9. | | | | |
| | However, if you contend that unemployment compensation received by you or your spouse was a | | | | | | | | | |
| 9 | benefit under the Social Security Act, do not list the amount of such compensation in Column A | | | sation in Column A | | | | | | |
| | or B, but instead state the amount in the space below: | | | | | | | | | |
| | | nployment compensation claimed to benefit under the Social Security Act Debtor | r \$ | 0.00 Spe | ous | e \$ | \$ | 0.00 | \$ | |
| | | ne from all other sources. Specify source and | l an | ount. If necessary | , lis | t additional sources | - | | - | |
| | on a s | eparate page. Do not include alimony or sep | ara | te maintenance pa | ıym | ents paid by your | | | | |
| | | e if Column B is completed, but include all cenance. Do not include any benefits received | | | | | | | | |
| | | ed as a victim of a war crime, crime against h | | | | | | | | |
| 10 | | stic terrorism. | | | | | | | | |
| | | | | Debtor | | Spouse | | | | |
| | a. b. | | \$ | | \$ | | | | | |
| | | 1 | \$ | | \$ | | _ | | # | |
| | | and enter on Line 10 | . \ /=` | A 11T 2 2 3 | 10 | . С.1 | \$ | 0.00 | \$ | |
| 11 | | otal of Current Monthly Income for § 707(b nn B is completed, add Lines 3 through 10 in | | | | | \$ | 3,113.57 | \$ | |

| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | | 3,113.57 | | | | |
|----|---|----|-----------|--|--|--|--|
| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | | | | | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$ | 37,362.84 | | | | |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | |
| | a. Enter debtor's state of residence: AZ b. Enter debtor's household size: 3 | \$ | 56,503.00 | | | | |
| | Application of Section 707(b)(7). Check the applicable box and proceed as directed. | | | | | | |
| 15 | The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the | | | | | | |
| | top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | | | | | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| | Part IV. CALCUL | ATION OF CUR | REN | Γ MONTHLY INCOM | ME FOR § 707(b)(2 | 2) |
|--|---|---|--------------------------|--|---|----|
| 16 | Enter the amount from Line 12. | | | | | \$ |
| 17 | Marital adjustment. If you checked Column B that was NOT paid on a dependents. Specify in the lines be spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zero. a. b. c. d. Total and enter on Line 17 | regular basis for the l low the basis for exclusions support of persons of purpose. If necessary, | nousehouding the | ld expenses of the debtor or e Column B income (such a n the debtor or the debtor's of | the debtor's s payment of the dependents) and the | \$ |
| 18 | Current monthly income for § 70 | 7(b)(2). Subtract Lin | e 17 fro | m Line 16 and enter the resu | ılt. | \$ |
| | Part V. C | ALCULATION | OF D | EDUCTIONS FROM | INCOME | |
| | Subpart A: De | ductions under Sta | ındard | s of the Internal Revenu | ie Service (IRS) | |
| National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | \$ | | | |
| 19B | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom | | | | | |
| | b1. Number of persons c1. Subtotal | | b2. | Number of persons Subtotal | | \$ |
| 20A | Local Standards: housing and uti Utilities Standards; non-mortgage of available at www.usdoj.gov/ust/ or the number that would currently be any additional dependents whom y | expenses for the appli- from the clerk of the allowed as exemption | expense cable control | es. Enter the amount of the bunty and family size. (This btcy court). The applicable fa | information is amily size consists of | \$ |

| 20B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | | | | | |
|-----|---|---|----|--|--|--|
| | c. Net mortgage/rental expense | Subtract Line b from Line a. | \$ | | | |
| 21 | Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below: | led under the IRS Housing and Utilities | \$ | | | |
| | Local Standards: transportation; vehicle operation/public transportation | rtation expense. | | | | |
| | You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation. | whether you pay the expenses of operating a | | | | |
| 22A | Check the number of vehicles for which you pay the operating expense included as a contribution to your household expenses in Line 8. | es or for which the operating expenses are | | | | |
| ZZA | $\square \ 0 \square \ 1 \square \ 2$ or more. | | | | | |
| | If you checked 0, enter on Line 22A the "Public Transportation" amou | | | | | |
| | Transportation. If you checked 1 or 2 or more, enter on Line 22A the 'Standards: Transportation for the applicable number of vehicles in the | | | | | |
| | Census Region. (These amounts are available at www.usdoj.gov/ust/ o | | \$ | | | |
| 22B | B Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | |
| | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) | | | | | |
| | \square 1 \square 2 or more. | | | | | |
| | Enter, in Line a below, the "Ownership Costs" for "One Car" from the | | | | | |
| 23 | (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy c Monthly Payments for any debts secured by Vehicle 1, as stated in Lir | | | | | |
| | the result in Line 23. Do not enter an amount less than zero. | | | | | |
| | a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle | \$ | | | | |
| | b. 1, as stated in Line 42 | \$ | | | | |
| | c. Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ | | | |
| | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. | | | | | |
| | Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of | | | | | |
| 24 | Monthly Payments for any debts secured by Vehicle 2, as stated in Lir | | | | | |
| | the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs | \$ | | | | |
| | Average Monthly Payment for any debts secured by Vehicle | | | | | |
| | b. 2, as stated in Line 42 | \$ Subtract Line b from Line a. | ¢ | | | |
| | c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly ex | | \$ | | | |
| 25 | | | | | | |
| | state and local taxes, other than real estate and sales taxes, such as inconsecurity taxes, and Medicare taxes. Do not include real estate or sales | | \$ | | | |

| 26 d | Other Necessary Expenses: involuntary deductions for eductions that are required for your employment, such as Do not include discretionary amounts, such as voluntary | retirement contributions, union dues, and uniform costs. | \$ | | | |
|--------|--|---|----|--|--|--|
| 27 li | Other Necessary Expenses: life insurance. Enter total available insurance for yourself. Do not include premiums for any other form of insurance. | | \$ | | | |
| 28 p | Other Necessary Expenses: court-ordered payments. Expay pursuant to the order of a court or administrative agend include payments on past due obligations included in Li | cy, such as spousal or child support payments. Do not | \$ | | | |
| 29 th | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | | | |
| | Other Necessary Expenses: childcare. Enter the total averable childcare - such as baby-sitting, day care, nursery and presented the control of the control o | | \$ | | | |
| 31 h | Other Necessary Expenses: health care. Enter the total a health care that is required for the health and welfare of yo insurance or paid by a health savings account, and that is include payments for health insurance or health savings | urself or your dependents, that is not reimbursed by n excess of the amount entered in Line 19B. Do not | \$ | | | |
| 32 a | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | | | | | |
| 33 Т | Total Expenses Allowed under IRS Standards. Enter the | e total of Lines 19 through 32. | \$ | | | |
| t | - | | | | | |
| 34 | | \$ | | | | |
| | a. Health Insurance b. Disability Insurance | \$ | | | | |
| | c. Health Savings Account | \$ | \$ | | | |
| - | Total and enter on Line 34. | <u> </u> | Ψ | | | |
| I b | If you do not actually expend this total amount, state you below: \$ | ur actual total average monthly expenditures in the space | | | | |
| 35 e | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | | | | | |
| 36 a | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | | | | | |
| 37 S | Home energy costs. Enter the total average monthly amount Standards for Housing and Utilities, that you actually expendent trustee with documentation of your actual expenses, and claimed is reasonable and necessary. | nd for home energy costs. You must provide your case | \$ | | | |
| 38 a s | Education expenses for dependent children less than 18. actually incur, not to exceed \$156.25* per child, for attenda school by your dependent children less than 18 years of ag documentation of your actual expenses, and you must expenses and not already accounted for in the IRS Star | ance at a private or public elementary or secondary e. You must provide your case trustee with explain why the amount claimed is reasonable and | \$ | | | |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | \$ |
|----|--|-------------------------------|---|----------------------------|--|----|
| 40 | Continue | ed charitable contributions. | Enter the amount that you will continganization as defined in 26 U.S.C. § 1 | | e form of cash or | \$ |
| 41 | Total Ad | lditional Expense Deduction | s under § 707(b). Enter the total of L | ines 34 through 40 | | \$ |
| | | S | ubpart C: Deductions for De | bt Payment | | |
| 42 | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42. | | | | | |
| | Na | me of Creditor | Property Securing the Debt | Average Monthly Payment | Does payment include taxes or insurance? | |
| | a. | | | \$ | □yes □no | |
| | | | | Total: Add Lines | | \$ |
| 43 | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor | | | | | \$ |
| 44 | priority to | | ms. Enter the total amount, divided b claims, for which you were liable at t as those set out in Line 28. | y 60, of all priority cl | aims, such as | \$ |
| | | | If you are eligible to file a case under the amount in line b, and enter the res | | | |
| 45 | b. (iiiit | ssued by the Executive Office | trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of | \$ x Total: Multiply Line | es a and b | \$ |
| 46 | Total De | eductions for Debt Payment. | Enter the total of Lines 42 through 45 | i. | | \$ |
| | | Sı | ibpart D: Total Deductions f | rom Income | | |
| 47 | Total of | all deductions allowed under | § 707(b)(2). Enter the total of Lines | 33, 41, and 46. | | \$ |
| | | Part VI. DE | TERMINATION OF § 707(b |)(2) PRESUMP | TION | |
| 48 | Enter the | e amount from Line 18 (Cur | rent monthly income for § 707(b)(2) |)) | | \$ |
| 49 | Enter th | e amount from Line 47 (Tota | al of all deductions allowed under § | 707(b)(2)) | | \$ |
| 50 | Monthly | disposable income under § 7 | 707(b)(2). Subtract Line 49 from Line | e 48 and enter the resu | ılt. | \$ |
| 51 | 60-mont | h disposable income under § | 707(b)(2). Multiply the amount in Li | ne 50 by the number | 60 and enter the | \$ |

| | Initial presumption determination. Check the applicable box and proceed as directed. | | |
|-------------------------------------|--|----------------------|--|
| 52 | ☐ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. | | |
| | ☐ The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. | | |
| | ☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the remainder of Part VI (L | ines 53 through 55). | |
| 53 | Enter the amount of your total non-priority unsecured debt | \$ | |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ | |
| | Secondary presumption determination. Check the applicable box and proceed as directed. | | |
| 55 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. | | |
| | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. | | |
| Part VII. ADDITIONAL EXPENSE CLAIMS | | | |
| 56 | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. | | |
| | Expense Description Monthly Amour | nt | |
| | a. | | |
| | b. | _ | |
| | d. \$ | - | |
| | Total: Add Lines a, b, c, and d \$ | | |
| Part VIII. VERIFICATION | | | |
| | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a join | t case, both debtors | |
| 57 | must sign.) Date: December 2, 2013 Signature: /s/ Jerie Lynn Redding | | |
| | Jerie Lynn Redding (Debtor) | | |
| | | | |

^{*} Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2013 to 11/30/2013.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Pay Advices

Year-to-Date Income:

Starting Year-to-Date Income: \$14,718.33 from check dated 5/31/2013 Ending Year-to-Date Income: \$33,124.75 from check dated 11/30/2013

Income for six-month period (Ending-Starting): \$18,406.42.

Average Monthly Income: \$3,067.74.

Line 8 - Child support income (including foster care and disability)

Source of Income: Child Support

Income by Month:

| 6 Months Ago: | 06/2013 | \$0.00 |
|---------------|--------------------|----------|
| 5 Months Ago: | 07/2013 | \$0.00 |
| 4 Months Ago: | 08/2013 | \$0.00 |
| 3 Months Ago: | 09/2013 | \$0.00 |
| 2 Months Ago: | 10/2013 | \$275.00 |
| Last Month: | 11/2013 | \$0.00 |
| | Average per month: | \$45.83 |
| | | |